

**SALES DISCLOSURE FORM**

State Form 46021 (R11/12-11)

Prescribed by Department of Local Government Finance  
Pursuant to IC 6-1.1-5.5**SDF ID**

<b>C06</b>	<b>2017</b>	<b>0015850</b>
------------	-------------	----------------

County Year Unique ID

SDF Date: 05/01/2017

PRIVACY NOTICE: The telephone numbers and Social Security numbers of the parties on this form are confidential according to IC 6-1.1-5.5-3(d).

**PART 1 - To be completed by BUYER/GRANTEE and SELLER/GRANTOR****A. PROPERTY TRANSFERRED - MUST BE CONVEYED ON A SINGLE CONVEYANCE DOCUMENT**

1. Property Number	Check box if applicable to parcel	5. Complete Address of Property	6. Complete Tax Billing Address (if different from property address)
A.) 06-04-03-000-001.010-006 019-18750-29	<input type="checkbox"/> 2. Split <input checked="" type="checkbox"/> 3. Land <input checked="" type="checkbox"/> 4. Improvement	5 STONE WALL LN ZIONSVILLE, IN 46077	5 STONE WALL LN ZIONSVILLE, IN 46077

7. Legal Description of Parcel A: CLIFDEN POND LOT 29 (1.26 AC)

B.)	<input type="checkbox"/> 2. Split <input type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement
-----	--

7. Legal Description of Parcel B:

**B. CONDITIONS - IDENTIFY ALL THAT APPLY**

If condition 1 applies, filer is subject to disclosure and a disclosure filing fee.

YES	NO	CONDITION
<input checked="" type="checkbox"/>	<input type="checkbox"/>	1. A transfer of real property interest for valuable consideration.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. Buyer is an adjacent property owner.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	3. Vacant land.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Exchange for other real property ("Trade").
<input type="checkbox"/>	<input checked="" type="checkbox"/>	5. Seller paid points. (Provide the value Table C Item 12.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. Change planned in the primary use of the property? (Describe in special circumstances in Table 3 Item 3.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. Existence of family or business relationship between buyer and seller.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Land contract. Contract term (YY): 0 and contract date (MM/DD/YYYY):
<input type="checkbox"/>	<input checked="" type="checkbox"/>	9. Personal property included in transfer. (Provide the value Table C Item 5.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	10. Physical changes to property between January 1 and date of sale. (Describe in special circumstances in Table C Item 3.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	11. Partial interest. (Describe in special circumstances in Table C Item 3.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	12. Easements or right-of-way grants.

If conditions 13-15 apply, filer is subject to disclosure and a disclosure filing fee.

YES	NO	CONDITION
<input type="checkbox"/>	<input checked="" type="checkbox"/>	13. Document for compulsory transactions as a result of foreclosure or express threat of foreclosure, divorce, court order, judgment, condemnation, or probate.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	14. Documents involving the partition of land between tenants in common, joint tenants, or tenants by the entirety.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	15. Transfer to a charity, not-for-profit organization, or government.

**C. SALES DATA - DISCLOSE VALUE OF ITEMS LISTED IN TABLE B, ITEMS 1-15**

- Conveyance date (MM/DD/YYYY): 05/01/2017
- Total number of parcels: 1
- Describe any unusual or special circumstances related to this sale, including the specification of any less-than-complete ownership interest and terms of seller financing.

**YES NO CONDITION**

- |                          |                                     |   |
|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 4. Family or business relationship existing between buyer and seller? |
|                          |                                     | Amount of discount: 0.00  |

Disclose actual value in money, property, a service, an agreement, or other consideration.

- |  |              |
|--|--------------|
| 5. Estimated value of personal property: | \$0.00       |
| 6. Sales price:                          | \$804,900.00 |

**YES NO CONDITION**

- |                          |                                     |   |
|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Is the seller financing sale? If yes, answer questions (8-13). |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 8. Is buyer/borrower personally liable for loan?                  |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9. Is this a mortgage loan?                                       |

- |                          |        |
|--------------------------|--------|
| 10. Amount of loan:      | \$0.00 |
| 11. Interest rate:       | 0.0000 |
| 12. Amount in points:    | \$0.00 |
| 13. Amortization period: | 0      |

## D. PREPARER

OLIVIA MITCHNER

*Preparer of the Sales Disclosure Form*

220 JACKSON ST

*Address (Number and Street)*

COLUMBUS, IN 47201

*City, State, and ZIP Code*

ESCROW CLOSER

*Title*

SECURITY TITLE SERVICES

*Company**Telephone Number**E-mail*

## E. SELLER(S)/GRANTOR(S)

LINDA SANDERS

*Seller 1 - Name as appears on conveyance document*

5 STONE WALL LANE

*Address (Number and Street)*

ZIONSVILLE, IN 46077

*City, State, and ZIP Code**Telephone Number**E-mail**Seller 2 - Name as appears on conveyance document**Address (Number and Street)**City, State, and ZIP Code**Telephone Number**E-mail*

**Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act".**

*Signature of Seller*

05/01/2017

*Printed Name of Seller**Sign Date (MM/DD/YYYY)**Signature of Seller**Printed Name of Seller**Sign Date (MM/DD/YYYY)*

## F. BUYER(S)/GRANTEE(S) - APPLICATION FOR PROPERTY TAX DEDUCTIONS - IDENTIFY ALL ITEMS THAT APPLY

JORDAN K SWENSSON

*Buyer 1 - Name as appears on conveyance document*

5444 BARLBY PLACE

*Address (Number and Street)*

INDIANAPOLIS, IN 46239

*City, State, and ZIP Code**Telephone Number**E-mail*

KELLY M SWENSSON

*Buyer 2 - Name as appears on conveyance document*

5444 BARLBY PLACE

*Address (Number and Street)*

INDIANAPOLIS, IN 46239

*City, State, and ZIP Code**Telephone Number**E-mail*

**THE SALES DISCLOSURE FORM MAY BE USED TO APPLY FOR CERTAIN DEDUCTIONS FOR THIS PROPERTY. IDENTIFY ALL THOSE THAT APPLY.**

YES NO CONDITION

- ☒ ☐ 1. Will this property be the buyer's primary residence? Provide complete address of primary residence, including county:

*Address (Number and Street)**City, State, and ZIP Code**County*

- ☐ ☒ 2. Does the buyer have a homestead in Indiana to be vacated for this residence? If yes, provide complete address of residence being vacated, including county:

*Address (Number and Street)**City, State, and ZIP Code**County*

YES NO CONDITION

- ☒ ☐ 3. Homestead  
☐ ☒ 4. Solar Energy Heating/Cooling System  
☐ ☒ 5. Wind Power Device  
☐ ☒ 6. Hydroelectric Power Device  
☐ ☒ 7. Geothermal Energy Heating/Cooling Device  
☐ ☒ 8. Is this property a residential rental property?  
☐ ☒ 9. Would you like to receive tax statements for this property via e-mail?  
*(Provide contact information below. Please see instructions for more information. Not available in all counties.)*

*Primary property owner contact name**E-mail*

**Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act". (Note: Spouse information, Social Security and Driver's License/Other numbers are not necessary if no Homestead Deduction is being filed.)**

*Signature of Buyer 1*

05/01/2017

*Printed Legal Name of Buyer 1**Sign Date (MM/DD/YYYY)**Last 5 digits of Buyer 1 Driver's License/ID/Other Number**State Last 5 Digits of Social Security Number**Signature of Buyer 2/Spouse*

05/01/2017

*Printed Legal Name of Buyer 2/Spouse**Sign Date (MM/DD/YYYY)**Last 5 digits of Buyer 2/Spouse Driver's License/ID/Other Number**State Last 5 Digits of Social Security Number*

## PART 2 - COUNTY ASSESSOR

The county assessor must verify and complete items 1 through 14 and stamp the sales disclosure form before sending to the auditor:

1. Property	2. AV Land	3. AV Improvement	4. Value of Personal Property	5. AV Total	6. Property Class Code	7. Neighborhood Code	8. Tax District	9. Acreage
A.)	\$119,300	\$473,900		\$593,200	510	19528	019	1.260
B.)								

  

Assessor Stamp	10. Identify physical changes to property between January 1 and date of sale.	YES	NO	CONDITION
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	11. Is form completed?
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	12. State sales fee required?
		13. Date of sale (MM/DD/YYYY): 05/01/2017		
14. Date form received (MM/DD/YYYY): 05/02/2017				

Items 15 through 18 are to be completed by the assessor when validating this sale:

15. If applicable, identify any additional special circumstances relating to validation of sale.	YES	NO	CONDITION
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	16. Sale valid for trending?
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	17. Validation of sale complete?
	18. Validated by: PJL		

## PART 3 - COUNTY AUDITOR

Auditor Stamp	1. Disclosure fee amount collected: \$10.00	YES	NO	CONDITION
	2. Other Local Fee: \$5.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6. Is form completed?
	3. Total Fee Collected: \$15.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7. State sales fee required?
	4. Auditor receipt book number: 47834	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Attachments complete?
	5. Date of transfer (MM/DD/YYYY): 05/02/2017			

## PART 4 - RECEIPT FOR STATEMENT OF DEDUCTION OF ASSESSED VALUATION

<p>SDF ID _____ SDF Date (MM/DD/YYYY) _____</p> <p>Parcel Number _____</p> <p>Check all that apply:</p> <p><input type="checkbox"/> Homestead      <input type="checkbox"/> Solar Energy      <input type="checkbox"/> Wind Power</p> <p><input type="checkbox"/> Hydroelectric      <input type="checkbox"/> Geothermal      <input type="checkbox"/> Rental Property</p> <p><input type="checkbox"/> Electronic Statement (e-mail) _____</p>	<p>Buyer 1 - Name as appears on conveyance document _____</p> <p>Address of Property (Number and Street) _____</p> <p>City, State, and ZIP Code of Property _____</p> <p>Auditor Signature _____ Date (MM/DD/YYYY) _____</p>
--	--

A person who knowingly and intentionally falsifies value of transferred real property, or omits or falsifies any information required to be provided in the sales disclosure form commits a Class C felony.